

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

110/595602

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/		/			
2	/		/			
3	/		/			
4	✓		✓			
5	✓		✓			
6	✓		✓			
7	✓		✓			
8	✓		✓			
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TOTAL IND.	2					
TOTAL DEP.	24	←	←	←		
TOTAL CLAIMS	26					

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL DEP.						
TOTAL CLAIMS						